

United States District Court

DISTRICT OF

Massachusetts

Paul Antonellis, Jr.

SUMMONS IN A CIVIL CASE

V.

CASE NUMBER:

Town of Salisbury

04 11678 WGY

Timothy McInerney

TO: (Name and address of defendant)

Town of Salisbury

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Robert Walker

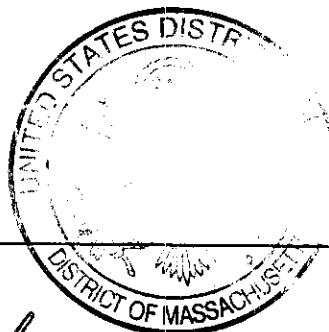
WALKER AND ASSOCIATES
 ATTORNEYS AT LAW
 96 COMMONWEALTH AVENUE
 CONCORD, MASSACHUSETTS 01742

an answer to the complaint which is herewith served upon you, within 20 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

TONY ANASTAS

CLERK

(BY) DEPUTY CLERK



JUL 29 2004

DATE

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal" on the reverse of this form.

| | |
|--|---|
| PLAINTIFF Paul Antonellis, Jr. | COURT CASE NUMBER 04-11678 WGY |
| DEFENDANT Town of Salisbury | TYPE OF PROCESS Summons & Complaint |
| SERVE Neil Harrington, Town Manager 5 Beach Road, Salisbury, MA 01952 (MASS) AT 5 Beach Road, Salisbury, MA 01952 (MASS) | |
| SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW: | |
| Robert Walker Walker & Associates 96 Commonwealth Avenue Concord, MA 01742 | |
| <input type="checkbox"/> Number of process to be served with this Form - 285 1 <input type="checkbox"/> Number of parties to be served in this case 2 <input type="checkbox"/> Check for service on U.S.A. | |

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold _____

**Mr. Harrington can be served during normal business hours,
Monday through Friday. His telephone number is (978) 465-2310.**

| | | | |
|--|---|---|------------------------|
| Signature of Attorney or other Originator requesting service on behalf of: <i>Robert Walker</i> | <input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT | TELEPHONE NUMBER (978) 371-9222 | DATE 8-12-04 |
|--|---|---|------------------------|

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

| | | | | | |
|---|---------------------------|-------------------------------------|------------------------------------|--|------------------------|
| I acknowledge receipt for the total number of process indicated. (Sign only first USM 285 if more than one USM 285 is submitted) | Total Process 1 | District of Origin No. 38 | District to Serve No. 38 | Signature of Authorized USMS Deputy or Clerk <i>Mary J. Lauvera</i> | Date 8/16/04 |
|---|---------------------------|-------------------------------------|------------------------------------|--|------------------------|

I hereby certify and return that have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below. I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

| | | |
|--|---|--|
| Name and title of individual served (if not shown above) | <input type="checkbox"/> A person of suitable age and discretion then residing in the defendant's usual place of abode. | |
|--|---|--|

| | | |
|---|--|----------------------|
| Address (complete only if different than shown above) | Date of Service 8/19/04 | Time 11 am |
| | <input type="checkbox"/> Signature of U.S. Marshal or Deputy <i>J. J. Lauvera</i> | |

| | | | | | | |
|-------------------------------|---|---------------------------------|---------------------------------|------------------|---|------------------|
| Service Fee \$45.00 | Total Mileage Charges \$32.12 | Forwarding Fee \$0.00 | Total Charges \$77.13 | Advance Deposits | Amount owed to U.S. Marshal or \$0.00 | Amount of Refund |
|-------------------------------|---|---------------------------------|---------------------------------|------------------|---|------------------|

REMARKS: